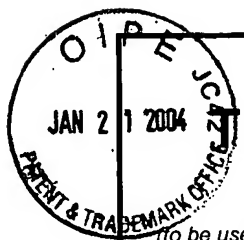


IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>		Application Number	10/052,159
		Filing Date	January 16, 2002
		First Named Inventor	Steven S. Davis
		Group Art Unit	1723
		Examiner Name	Matthew O. Savage
Total Number of Pages in This Submission (including this sheet)	8	Attorney Docket No.	1512.EPSI.NP

ENCLOSURES <i>(check all that apply)</i>		
<input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Appeal Communication: <input type="checkbox"/> Appeal Notice <input type="checkbox"/> Appeal Brief <input type="checkbox"/> Reply Brief <input type="checkbox"/> Assignment with Cover Sheet <input type="checkbox"/> Certified Copy of Priority Document(s) <input checked="" type="checkbox"/> Check in the amount of \$ <u>1,360.00</u> <input type="checkbox"/> Credit card authorization in the amount of \$ ____ <input type="checkbox"/> Declaration & Power of Attorney <input type="checkbox"/> Drawings ____ sheets <input type="checkbox"/> Formal <input type="checkbox"/> Informal	<input type="checkbox"/> Extension of Time Request ____ month <input type="checkbox"/> Fee Calculation Table <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form 1449 <input type="checkbox"/> Copies of IDS References <input checked="" type="checkbox"/> Issue Fee Transmittal & Advance Order	<input type="checkbox"/> Maintenance Fee Transmittal ____ year <input type="checkbox"/> Missing Parts Response <input type="checkbox"/> Notification of Change of Attorney Address & Docket Number <input checked="" type="checkbox"/> Return Postcard <input type="checkbox"/> Revocation & Power of Attorney <input type="checkbox"/> Status Inquiry <input checked="" type="checkbox"/> Other: Copy of Assignment documents
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT	
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Signature		Date	1-14-04
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